FORM D

SEC Mail Mail Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

MAY 12 kuub

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

Washington, DC

SECTION 4(6), AND/OR NIFORM LIMITED OFFERING EXEMPTIO

143.	5278
OMB APPI	
OMB Number:	3235-0076
Expires:	May 31, 2008
Estimated avera	ige burden
hours per respoi	nse16.00

SEC USE ONLY					
Prefix	Serial				
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DATE REC	EIVED				
1	1 1				

109 UNIFORM LIMITED OFFERING EXEMI	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Private placement of limited partnership interests of CIVC Partners Fund IV-A, L.P.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	☐ ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
CIVC Partners Fund IV-A, L.P.	06040656
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
191 North Wacker Drive, Suite 1100; Chicago, IL 60606	(312) 873-7300
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Private equity fund formed for the purpose of making investments in equity and debt securiti	es of companies.
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	lease specify):
Month Year	PROCESSED
Actual or Estimated Date of Incorporation or Organization: 05 08 Actual Estim	nated \$440
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	DE WAI 192008
GENERAL INSTRUCTIONS	THOMSON REUTERS
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D o 77d(6).	
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report hereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate refiance on the Uniform Limited Offering Exemption (ULOE) for st ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal ex appropriate federal notice will not result in a loss of an available state exemption unless.	emption. Conversely, failure to file the

filing of a federal notice.

A. BASIC IDENTIFICATION DATA
Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the iss
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
full Name (Last name first, if individual)
CIVC GP IV, L.P. (General Partner of the Issuer) Business or Residence Address (Number and Street, City, State, Zip Code)
191 North Wacker Drive, Suite 1100; Chicago, IL 60606
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
Managing Partner
Full Name (Last name first, if individual)
CIVC GP, LLC (General Partner of the General Partner of the Issuer)
Business or Residence Address (Number and Street, City, State, Zip Code)
191 North Wacker Drive, Suite 1100; Chicago, IL 60606
Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Helle, Daniel G.
Business or Residence Address (Number and Street, City, State, Zip Code)
191 North Wacker Drive, Suite 1100; Chicago, IL 60606
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
full Name (Last name first, if individual)
Miller, Michael J.
Business or Residence Address (Number and Street, City, State, Zip Code)
191 North Wacker Drive, Suite 1100; Chicago, IL 60606
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Perry, Christopher J.
Business or Residence Address (Number and Street, City, State, Zip Code)
191 North Wacker Drive, Suite 1100; Chicago, IL 60606
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Wedner, Marcus D.
Business or Residence Address (Number and Street, City, State, Zip Code)
191 North Wacker Drive, Suite 1100; Chicago, IL 60606
Check Box(es) that Apply: Promoter Beneficial Owner Description Director General and/or Managing Partner
Full Name (Last name first, if individual)
Yamada, Keith H.
Business or Residence Address (Number and Street, City, State, Zip Code)
191 North Wacker Drive, Suite 1100; Chicago, IL 60606

					В. П	NFORMAT	ON ABOU	T OFFERI	NG				
												Yes	No
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									$ \angle $			
_	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?								a 10 0	00,000 *			
2.	What is	the minim	um investm	ent that w	ill be acce	pted from a	iny individ	ual?		••••••		~	
3.	Does th	e offering p	permit joint	ownershi	p of a sing	le unit?						Yes ☑	No □
4.			ion request										
	If a pers	on to be lis s, list the na	ilar remuner ted is an ass ime of the b you may so	ociated pe roker or de	rson or age caler. If mo	ent of a brok ore than five	er or deale (5) persor	r registered is to be list	l with the S ed are asso	EC and/or	with a state		
			first, if indi	vidual)									
_	S Securi		A. I (2)	1	1.64 . 63	4 . 64.4. 7							
			Address (N v York, NY		I Street, Ci	ity, State, Z	.ip Code)						
			oker or Dea						·				
		, ,,,,,,,											
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)		•••••			······	••••••	[Al	l States
	AL	AK	AZ	[AR]	CA	CO	[CT]	[DE]	[DC]	FL	GA	HI	[ID]
	IL	ĪN	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	[NC]	ND	OH	OK	OR	PA
	RI	SC	SD	[TN]	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						
Na	me of Ass	sociated Br	oker or De	ıler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)	•••••		•••••	••••••			All States	
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	lA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	(NH)	NJ	NM	NY	NC.	ND	OH)	OK]	OR	PA
	RI	[SC]	SD	TN	TX	UT	VT	VA]	WA]	WV	WI	WY]	PR
Ful	l Name (Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	lumber an	d Street, C	ity, State.	Zip Code)						
Na	me of Ass	sociated Br	oker or Dea	ıler									
Sta	tes in Wh	iich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						·
	(Check "All States" or check individual States)								☐ AI	! States			
	AL	AK	AZ	ĀR	CA	CO	CT	DE	[DC]	(FL)	[GA]	HI	ID
	IL	IN	ĪĀ	KS	KY	LA	ME	MD	MΛ	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

* The General Partner reserves the right to accept smaller participations.

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check		
	this box and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	<u>0</u>	<u>\$ 0</u>
	Equity	<u>s 0 </u>	<u>\$ 0</u>
	Common Preferred		
	Convertible Securities (including warrants)	\$ 0	§ 0
	Partnership Interests	\$ 700,000,000	\$ 0
	Other (Specify)		\$ 0
	Total		* \$ 0
	Answer also in Appendix, Column 3, if filing under ULOE.	*	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors		s0
	Non-accredited Investors		s <u> </u>
	Total (for filings under Rule 504 only)	0	\$_0
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	0	\$ <u></u> 0
	Regulation A	0	\$ <u>0</u>
	Rule 504	0	<u>\$</u> 0
	Total	0	<u>s</u> 0
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ <u>0</u>
	Printing and Engraving Costs		\$_50,000
	Legal Fees	[7	\$ 900,000
	Accounting Fees		\$ 50,000
	Engineering Fees	_	
	Sales Commissions (specify finders' fees separately) (Private Placement fees)		*
	Other Expenses (identify) (general fund-raising, travel, postage and misc. costs)		
	Total	_	- 0.000.000

^{*} The General Partner reserves the offer a greater amount of limited partnership interests.
** Placement Agent fees to be paid based upon a sliding schedule. Such fees are offset dollar for dollar against the management fees payable by the Issuer. The payment of such fees will not involve any additional expenditure of funds by the Issuer.

a	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		s69	8,000,000
¢	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.			
		Payments to Officers,		
		Directors, & Affiliates		yments to Others
5	Salaries and fees[5 70,000,000°	☑ \$_	0
I	Purchase of real estate	7 \$ <u>0</u>	Z \$_	0
	Purchase, rental or leasing and installation of machinery and equipment	Z \$ 0	Z]\$_	0
(Construction or leasing of plant buildings and facilities	Z s_0	[] \$_	
6	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another			
	issuer pursuant to a merger)			621,000,00
	Repayment of indebtedness	_	∑ \$_	7 000 000
1	Working capital	-	[] \$_	7,000,000
(Other (specify):	∑ \$_0	∑ 2 ⁻	0
-		<u></u>	\[\bar{\cappa}\] \s^-	0
(Column Totals	Z \$_70,000,000	[] \$_	628,000,00
-	Total Payments Listed (column totals added)	 s 69.	8,000,8	000
	D. FEDERAL SIGNATURE	1, 3		

Issuer (Print or Type)	Signature		Date					
CIVC Partners Fund IV-A, L.P.			May <u>§</u> , 2008					
Name of Signer (Print or Type)	Title of Signer	(Print or Type)	1 1 10000000000000000000000000000000000					
Marcus D. Wedner		of Signer (Print or Type) aging Member of CIVC GP, LLC, general partner of CIVC GP IV, L.P., ral partner of the Issuer						

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

^{*} Estimated aggregate amount of management fees for first five years. The issuer will continue to pay management fees thereafter.

	E. STATE SIGNATURE		-0
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⋉
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is for (17 CFR 239.500) at such times as required by state law.	led a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informat issuer to offerees.	ion furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entimited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of establishing that these conditions have been satisfied.		
	er has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beha horized person.	lf by the	undersigned
Issuer (I	Print or Type) Date	•	· -
CIVC P	artners Fund IV-A, L.P. May 8, 2008		

Title (Print or Type)

general partner of the Issuer

Managing Member of CIVC GP, LLC, general partner of CIVC GP IV, L.P.,

Instruction.

Name (Print or Type)

Marcus D. Wedner

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Type of security Intend to sell and aggregate under State ULC (if yes, attach	L				AP	PENDIX				
Part B-Hem 1 Part C-Hem 1 Number of Accredited Investors	1	Intend to non-a	l to sell ccredited	Type of security and aggregate offering price			investor and		Disqualification under State ULOE (if yes, attach explanation of	
Number of Accredited Amount Number of Non-Accredited Investors Amount Ves No										
State Yes No		(T tall E D	-ricin 1)	(Turt C-term 1)	Number of	T	•		(14112	
AK X See footnote below 0 \$0.00 0 \$0.00 X AZ X See footnote below 0 \$0.00 0 \$0.00 X AR X See footnote below 0 \$0.00 0 \$0.00 X CA X See footnote below 0 \$0.00 0 \$0.00 X CO X See footnote below 0 \$0.00 0 \$0.00 X CT X See footnote below 0 \$0.00 0 \$0.00 X DE X See footnote below 0 \$0.00 0 \$0.00 X DC X See footnote below 0 \$0.00 0 \$0.00 X FL X See footnote below 0 \$0.00 0 \$0.00 X HI X See footnote below 0 \$0.00 0 \$0.00 X ID X See footnote b	State	Yes	No		Accredited	Amount	Non-Accredited	Amount	Yes	No
AZ X -See footnote below 0 \$0.00 0 \$0.00 X AR X -See footnote below 0 \$0.00 0 \$0.00 X CA X -See footnote below 0 \$0.00 0 \$0.00 X CO X -See footnote below 0 \$0.00 0 \$0.00 X CT X -See footnote below 0 \$0.00 0 \$0.00 X DE X -See footnote below 0 \$0.00 0 \$0.00 X DC X -See footnote below 0 \$0.00 0 \$0.00 X FL X -See footnote below 0 \$0.00 0 \$0.00 X GA X -See footnote below 0 \$0.00 0 \$0.00 X HI X -See footnote below 0 \$0.00 0 \$0.00 X ID X -See	AL		×	* See footnote below	0	\$0.00	0	\$0.00		×
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CO	AR	! 	×	* See footnote below	0	\$0.00	0	\$0.00		×
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HI	FL		×	* See footnote below	0	\$0.00	0	\$0.00		×
HI	GA		×	* See footnote below	0	\$0.00	0	\$0.00		
IL	НІ		×	* See footnote below	0	\$0.00	0	\$0.00		×
IN	ID		×	* See footnote below	0	\$0.00	0	\$0.00		×
IA X See footnote below 0 \$0.00 0 \$0.00 X KS X See footnote below 0 \$0.00 0 \$0.00 X KY X See footnote below 0 \$0.00 0 \$0.00 X LA X See footnote below 0 \$0.00 0 \$0.00 X ME X See footnote below 0 \$0.00 0 \$0.00 X MD X See footnote below 0 \$0.00 0 \$0.00 X MA X See footnote below 0 \$0.00 0 \$0.00 X MI X See footnote below 0 \$0.00 0 \$0.00 X MN X See footnote below 0 \$0.00 0 \$0.00 X	IL		×	* See footnote below	0	\$0.00	0	\$0.00		×
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KY X 'See footnote below 0 \$0.00 0 \$0.00 X LA X 'See footnote below 0 \$0.00 0 \$0.00 X ME X 'See footnote below 0 \$0.00 0 \$0.00 X MD X 'See footnote below 0 \$0.00 0 \$0.00 X MA X 'See footnote below 0 \$0.00 0 \$0.00 X MI X 'See footnote below 0 \$0.00 0 \$0.00 X MN X 'See footnote below 0 \$0.00 0 \$0.00 X	IA		×	* See footnote below	0	\$0.00	0	\$0.00		×
LA X *See footnote below 0 \$0.00 0 \$0.00 X ME X *See footnote below 0 \$0.00 0 \$0.00 X MD X *See footnote below 0 \$0.00 0 \$0.00 X MA X *See footnote below 0 \$0.00 0 \$0.00 X MI X *See footnote below 0 \$0.00 0 \$0.00 X MN X *See footnote below 0 \$0.00 0 \$0.00 X	KS		×	* See footnote below	0	\$0.00	0	\$0.00		×
ME X *See footnote below 0 \$0.00 0 \$0.00 X MD X *See footnote below 0 \$0.00 0 \$0.00 X MA X *See footnote below 0 \$0.00 0 \$0.00 X MI X *See footnote below 0 \$0.00 0 \$0.00 X MN X *See footnote below 0 \$0.00 0 \$0.00 X	KY		×	* See footnote below	0	\$0.00	0	\$0.00		×
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MA X * See footnote below 0 \$0.00 0 \$0.00 X MI X * See footnote below 0 \$0.00 0 \$0.00 X MN X * See footnote below 0 \$0.00 0 \$0.00 X	ME		×	* See footnote below	0	\$0.00	0	\$0.00		×
MI X *See footnote below 0 \$0.00 0 \$0.00 X MN X *See footnote below 0 \$0.00 0 \$0.00 X	MD		×	* See footnote below	0	\$0.00	0	\$0.00		×
MN	MA		×	* See footnote below	0	\$0.00	0	\$0.00		×
	МІ		×	* See footnote below	0	\$0.00	0	\$0.00		×
MS	MN		×	* See footnote below	0	\$0.00	0	\$0.00		×
	MS		×	* See footnote below	0	\$0.00	0	\$0.00		×

APPENDIX

[•] The General Partner is offering to sell up to \$700 million in limited partnership interests. The General Partner reserves the right to offer a greater amount of limited partnership interests. The General Partner is not allocating any specific portion of the offering to specific states.

APPENDIX

i		2	3			4		5	
,	Intend to non-a investor	l to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо		×	* See footnote below	0	\$0.00	0	\$0.00		×
МТ		×	* See footnote below	0	\$0.00	0	\$0.00		×
NE		×	* See footnote below	0 .	\$0.00	0	\$0.00	• •	×
NV		×	* See footnote below	0	\$0.00	0	\$0.00		×
ИН		×	* See footnote below	0	\$0.00	0	\$0.00		×
NJ		×	* See footnote below	0	\$0.00	0	\$0.00		×
NM		×	* See footnote below	0	\$0.00	0	\$0.00		×
NY		×	* See footnote below	0	\$0.00	0	\$0.00		×
NC		×	* See footnote below	0	\$0.00	0	\$0.00		×
ND		×	* See footnote below	0	\$0.00	0	\$0.00		×
ОН		×	* See footnote below	0	\$0.00	0	\$0.00		×
ок		×	* See footnote below	0	\$0.00	0	\$0.00		×
OR		×	* See footnote below	0	\$0.00	0	\$0.00		×
PA		×	* See footnote below	0	\$0.00	0	\$0.00		×
RI		×	* See footnote below	0	\$0.00	0	\$0.00	:	×
SC		×	* See footnote below	0	\$0.00	0	\$0.00		×
SD		×	* See footnote below	0	\$0.00	0	\$0.00		×
TN		×	* See footnote below	0	\$0.00	0	\$0.00		×
TX		×	* See footnote below	0	\$0.00	0	\$0.00		×
UΤ		×	* See footnote below	0	\$0.00	0	\$0.00		×
VT		×	* See footnote below	0	\$0.00	0	\$0.00		×
VA		×	* See footnote below	0	\$0.00	0	\$0.00		×
WA		×	* See footnote below	0	\$0.00	0	\$0.00		×
wv		×	* See footnote below	0	\$0.00	0	\$0.00		×
WI		×	* See footnote below	0	\$0.00	0	\$0.00		×

^{*} The General Partner is offering to sell up to \$700 million in limited partnership interests. The General Partner reserves the right to offer a greater amount of limited partnership interests. The General Partner is not allocating any specific portion of the offering to specific states.

				APP	ENDIX					
1		2	3		4					
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ate ULOE attach ation of granted) -Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		×	* See footnate below	0	\$0.00	0	\$0.00		×	
PR		×	* See footnote below	0	\$0.00	0	\$0.00		×	

END

^{*} The General Partner is offering to sell up to \$700 million in limited partnership interests. The General Partner reserves the right to offer a greater amount of limited partnership interests. The General Partner is not allocating any specific portion of the offering to specific states,